

CLAIMS ONLY						Application Number <i>18/092726</i>	Filing Date							
						Applicant(s)								
CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
		Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
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47								97						
48								98						
49								99						
50								100						
Total Indep		9						Total Indep						
Total Depend		12						Total Depend						
Total Claims		21						Total Claims						

Best Available Copy